

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND			FEC IDENTIFICATION NUMBER ▼ C C00524454		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date 09 / 13 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 147.30		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.5833
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: AL <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 147.30			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date 09 / 13 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 21.41		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.5834
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: AK <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 21.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			168.71		
(b) SUBTOTAL of Unitemized Independent Expenditures▶					
(c) TOTAL Independent Expenditures.....▶					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">SCOTT B MACKENZIE</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date 09 / 14 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

194.66

Transaction ID : SE.5835

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: AZ

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

194.66

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

89.27

Transaction ID : SE.5836

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: AR

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

89.27

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

283.93

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

1138.92

City
AKRONState
OHZip Code
44321

Transaction ID : SE.5837

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: CA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

1138.92

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

155.76

City
AKRONState
OHZip Code
44321

Transaction ID : SE.5838

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: CO

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

155.76

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1294.68

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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SCOTT B MACKENZIE

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

111.30

City
AKRONState
OHZip Code
44321

Transaction ID : SE.5839

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought: ☐ House State: CT
☐ Senate District: 00
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

111.30

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

28.15

City
AKRONState
OHZip Code
44321

Transaction ID : SE.5840

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought: ☐ House State: DE
☐ Senate District: 00
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

28.15

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

139.45

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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SCOTT B MACKENZIE

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

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Y Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

603.65

Transaction ID : SE.5841

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: FL

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

603.65

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

293.56

Transaction ID : SE.5842

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: GA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

293.56

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

897.21

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M / D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date M M / D D / Y Y Y Y Y Y 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 42.89	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5843
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: HI <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 42.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date M M / D D / Y Y Y Y Y Y 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 46.36	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5844
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: ID <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 46.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		89.25	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">SCOTT B MACKENZIE</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y 09 / 14 / 2012</p>			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 391.57	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5845
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IL District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 391.57		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 197.14	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5846
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: IN District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 197.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	588.71
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 8 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

93.69

Transaction ID : SE.5847

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: IA

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

93.69

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

86.05

Transaction ID : SE.5848

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: KS

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

86.05

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

179.74

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
09 / 14 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

134.19

Transaction ID : SE.5849

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought: ☐ House State: KY
☐ Senate District: 00
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

134.19

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

138.52

Transaction ID : SE.5850

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought: ☐ House State: LA
☐ Senate District: 00
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

138.52

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

272.71

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

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Date

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24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 10 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 42.44	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5851
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: ME <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 42.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 179.60	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5852
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: MD <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 179.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		222.04	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>SCOTT B MACKENZIE</u>		Date M M M / D D D / Y Y Y Y Y Y 09 / 14 / 2012	
[Electronically Filed]			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

207.69

Transaction ID : SE.5853

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought: ☐ House State: MA
☐ Senate District: 00
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

207.69

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

303.78

Transaction ID : SE.5854

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought: ☐ House State: MI
☐ Senate District: 00
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

303.78

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

511.47

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 163.00	
City AKRON	State OH	Zip Code 44321	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Transaction ID : SE.5855
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Office Sought: <input type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 163.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 89.30	
City AKRON	State OH	Zip Code 44321	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Transaction ID : SE.5856
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Office Sought: <input type="checkbox"/> House State: MS <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 89.30		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	252.30
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature _____ Date MM / DD / YYYY
09 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 13 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 184.29	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5857
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: MO <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 184.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 31.09	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5858
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: MT <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31.09		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		215.38	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">SCOTT B MACKENZIE</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M M / D D D / Y Y Y Y Y Y 09 / 14 / 2012</p>			

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 14 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

55.41

Transaction ID : SE.5859

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: NE

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

55.41

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

82.54

Transaction ID : SE.5860

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: NV

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

82.54

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

137.95

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

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Y Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 15 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

41.61

Transaction ID : SE.5861

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: NH

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

41.61

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

271.64

Transaction ID : SE.5862

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: NJ

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

271.64

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

313.25

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 16 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C

C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M /

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Y Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

62.63

Transaction ID : SE.5863

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: NM

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

62.63

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

608.30

Transaction ID : SE.5864

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: NY

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

608.30

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

670.93

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 17 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ C C00524454	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>09</div><div>13</div><div>2012</div></div>	
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">295.30</div>	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5865
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">295.30</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>09</div><div>13</div><div>2012</div></div>	
Mailing Address 325 SPRINGSIDE DR		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">21.35</div>	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5866
Purpose of Expenditure VOTER CONTACT CALLS	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: ND <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">21.35</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">316.65</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

Signature

[Electronically Filed]

Date

MM / DD / YYYY

09 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 18 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

354.73

City State Zip Code
AKRON OH 44321

Transaction ID : SE.5867

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought: ☐ House State: OH
☐ Senate District: 00
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

354.73

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

114.43

City State Zip Code
AKRON OH 44321

Transaction ID : SE.5868

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought: ☐ House State: OK
☐ Senate District: 00
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

114.43

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

469.16

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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SCOTT B MACKENZIE

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 19 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

120.55

Transaction ID : SE.5869

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004Office Sought: ☐ House State: OR
☐ Senate District: 00
☒ PresidentCheck One: ☐ Support ☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

120.55

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2012

Mailing Address 325 SPRINGSIDE DR

Amount

400.01

Transaction ID : SE.5870

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004Office Sought: ☐ House State: PA
☐ Senate District: 00
☒ PresidentCheck One: ☐ Support ☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

400.01

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

520.56

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 20 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

33.33

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.5871

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: RI

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

33.33

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

144.21

City

AKRON

State

OH

Zip Code

44321

Transaction ID : SE.5872

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: SC

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

144.21

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

177.54

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 21 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

24.88

Transaction ID : SE.5873

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: SD

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

24.88

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

M M / D D / Y Y Y Y Y Y
09 / 13 / 2012

Mailing Address 325 SPRINGSIDE DR

City
AKRONState
OHZip Code
44321

Amount

196.81

Transaction ID : SE.5874

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought:

☐ House

State: TN

☐ Senate

District: 00

☒ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Calendar Year-To-Date Per Election
for Office Sought

196.81

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

221.69

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
09 / 14 / 2012

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 22 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND			FEC IDENTIFICATION NUMBER ▼ C C00524454		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date M M / D D / Y Y Y Y Y Y 09 / 13 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 749.95		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.5875
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 749.95			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date M M / D D / Y Y Y Y Y Y 09 / 13 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 77.62		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.5876
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: UT <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 77.62			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			827.57		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">SCOTT B MACKENZIE</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y 09 / 14 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 23 OF 26
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND			FEC IDENTIFICATION NUMBER ▼ C C00524454		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date M M / D D / Y Y Y Y Y Y 09 / 13 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 20.05		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.5877
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: VT <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 20.05			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP			Date M M / D D / Y Y Y Y Y Y 09 / 13 / 2012		
Mailing Address 325 SPRINGSIDE DR			Amount 250.19		
City AKRON		State OH	Zip Code 44321		Transaction ID : SE.5878
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004		Office Sought: <input type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 250.19			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			270.24		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">SCOTT B MACKENZIE</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y 09 / 14 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

CONSERVATIVE MAJORITY FUND

FEC IDENTIFICATION NUMBER ▼

C C00524454

Check If ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

210.32

Transaction ID : SE.5879

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought: ☐ House State: WA
☐ Senate District: 00
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

210.32

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

INFOCISION MANAGEMENT CORP

Date

MM / DD / YYYY

Mailing Address 325 SPRINGSIDE DR

Amount

58.93

Transaction ID : SE.5880

Purpose of Expenditure
VOTER CONTACT CALLSCategory/
Type 004

Office Sought: ☐ House State: WV
☐ Senate District: 00
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARAK HUSSEIN OBAMA

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought

58.93

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

269.25

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

MM / DD / YYYY

Signature

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CONSERVATIVE MAJORITY FUND		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00524454 </div>	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 175.75	
City AKRON	State OH	Zip Code 44321	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 175.75		Transaction ID : SE.5881	
Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 17.36	
City AKRON	State OH	Zip Code 44321	
Purpose of Expenditure VOTER CONTACT CALLS		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: WY <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought 17.36		Transaction ID : SE.5882	
(a) SUBTOTAL of Itemized Independent Expenditures.....		193.11	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature SCOTT B MACKENZIE		Date MM / DD / YYYY 09 / 14 / 2012 [Electronically Filed]	

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

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Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee INFOCISION MANAGEMENT CORP		Date MM / DD / YYYY 09 / 13 / 2012	
Mailing Address 325 SPRINGSIDE DR		Amount 20.54	
City AKRON	State OH	Zip Code 44321	Transaction ID : SE.5883
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: DC District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: BARAK HUSSEIN OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 20.54		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure		Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	20.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	9524.02

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY
09 / 14 / 2012